Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 1 of 46

| B1 (Official | Form 1)(04 | | | ~ | | <u> </u> | ~ | g0 ± 0. | | | | | |
|--|---|---|---|---|---|--|---|--|--|--|--|--------------------------------------|---|
| | | | United No | | Bankı District | | | | | | Vol | luntary | Petition |
| Name of De Garcia, | | lividual, ente | er Last, First | Middle): | | | Name | of Joint De | ebtor (Spouse |) (Last, First | , Middle): | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | | |
| Last four dig | | Sec. or Indi | vidual-Taxpa | nyer I.D. (| ITIN)/Com | plete EIN | Last for | our digits o | f Soc. Sec. or | Individual- | Taxpayer I. | .D. (ITIN) N | To./Complete EIN |
| | ess of Debto | or (No. and | Street, City, | and State) | : | | | Address of | Joint Debtor | (No. and St | reet, City, a | and State): | |
| | | | | | Г | ZIP Code 60432 | : | | | | | | ZIP Code |
| County of R Will | esidence or | of the Princ | cipal Place o | f Business | | 00-102 | Count | y of Reside | ence or of the | Principal Pla | ace of Busi | iness: | _ |
| Mailing Add | lress of Deb | otor (if diffe | rent from str | eet addres | ss): | | Mailir | ng Address | of Joint Debt | or (if differe | nt from stro | eet address): | |
| | | | | | Г | ZIP Code | : | | | | | | ZIP Code |
| Location of (if different) | | | | | • | | • | | | | | | |
| (Form | • • | f Debtor | one box) | | | of Business | 3 | | • | of Bankrup Petition is Fi | . • | | ch |
| (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) | | | ☐ Health Care Business ☐ Single Asset Real Estate as definin 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank | | | s defined | Chapt Chapt Chapt Chapt Chapt Chapt | er 7 er 9 er 11 er 12 | ☐ Cl of ☐ Cl | hapter 15 F a Foreign hapter 15 F | Petition for F Main Proce Petition for F Nonmain Pi | eding Recognition | |
| | • | 15 Debtors | | Othe | | mnt Entite | | | | | e of Debts k one box) | | |
| Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: | | | | Tax-Exempt Entity (Check box, if applicable) □ Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code). | | e) zation tates | defined "incurr | are primarily co d in 11 U.S.C. § red by an indivi onal, family, or | nsumer debts, 101(8) as dual primarily | for | | s are primarily ness debts. | |
| | Fi | ling Fee (C | heck one box | () | | | one box: | | - | ter 11 Debt | | | |
| attach sign debtor is u Form 3A. | e to be paid in ned application unable to pay | n installments on for the cou fee except in | (applicable to nrt's considerat n installments. able to chapter nrt's considerat | ion certifyi Rule 1006(7 individua | ng that the (b). See Office als only). Mu | ial Check Check Check | Debtor is not if: Debtor's agg are less than all applicable A plan is bein | a small busing regate nonco \$2,490,925 (each boxes: any filed with | | defined in 11 United debts (exo to adjustment | U.S.C. § 101 cluding debts t on 4/01/16 | (51D). s owed to insiand every three | ders or affiliates) ee years thereafter). reditors, |
| Debtor e | estimates that | at funds will at, after any | be available | erty is ex | cluded and | nsecured cr administrat | editors. | | S.C. § 1126(b). | THIS | S SPACE IS | FOR COURT | USE ONLY |
| Estimated N | | | for distribut | ion to uns | ecureu creo | nois. | | | | | | | |
| 1- 49 | □ 50- 99 | 100- 199 | | 1,000- 5,000 | 5,001- 10,000 | 10,001- 25,000 | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | | | | |
| Estimated A So to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | | |
| Estimated Li \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | | |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main

Document Page 2 of 46

B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Garcia, Raful (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Patrick A. Meszaros November 2, 2015 Signature of Attorney for Debtor(s) (Date) Patrick A. Meszaros 6239538 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13)

Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Raful Garcia

Signature of Debtor Raful Garcia

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

November 2, 2015

Date

Signature of Attorney*

X /s/ Patrick A. Meszaros

Signature of Attorney for Debtor(s)

Patrick A. Meszaros 6239538

Printed Name of Attorney for Debtor(s)

Law Office of Patrick A. Meszaros

Firm Name

1100 W. Jefferson Street Joliet, IL 60435

Address

Email: PatrickMeszaros@Yahoo.com 815-722-4001 Fax: 815-722-4007

Telephone Number

November 2, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Garcia, Raful

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| T 7 |
|------------|
| X |
| Z3 |

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| _ | | |
|---|---|--|
| | 7 | |

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 4 of 46

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

| In re | Raful Garcia | Case No. | | |
|-------|--------------|-----------|---------|---|
| | | Debtor(s) | Chapter | 7 |
| | | | | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

| ■ 1. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a cred |
|---|
| counseling agency approved by the United States trustee or bankruptcy administrator that outlined the |
| opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have |
| a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy |
| of any debt repayment plan developed through the agency. |

| 2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit |
|---|
| counseling agency approved by the United States trustee or bankruptcy administrator that outlined the |
| opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do |
| not have a certificate from the agency describing the services provided to me. You must file a copy of a |
| certificate from the agency describing the services provided to you and a copy of any debt repayment plan |
| developed through the agency no later than 14 days after your bankruptcy case is filed. |

| ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to |
|--|
| obtain the services during the seven days from the time I made my request, and the following exigent |
| circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case |
| now. [Summarize exigent circumstances here.] |

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 5 of 46

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. Page |
|---|
| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); |
| ☐ Active military duty in a military combat zone. |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling equirement of 11 U.S.C. § 109(h) does not apply in this district. |
| I certify under penalty of perjury that the information provided above is true and correct. |
| Signature of Debtor: /s/ Raful Garcia |
| Raful Garcia Date: November 2, 2015 |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 6 of 46

B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

| In re | Raful Garcia | | Case No | |
|-------|--------------|--------|---------|---|
| - | | Debtor | _, | |
| | | | Chapter | 7 |
| | | | 1 | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 70,000.00 | | |
| B - Personal Property | Yes | 3 | 72,239.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 114,605.73 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 6 | | 16,564.12 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | 0.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 2,035.00 |
| Total Number of Sheets of ALL Schedu | ıles | 19 | | | |
| | T | otal Assets | 142,239.00 | | |
| | | | Total Liabilities | 131,169.85 | |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 7 of 46

B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

| In re | Raful Garcia | | Case No | |
|-------|--------------|--------|---------|---|
| | | Debtor | | |
| | | | Chapter | 7 |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 0.00 |

State the following:

| Average Income (from Schedule I, Line 12) | 0.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 22) | 2,035.00 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 0.00 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 44,605.73 |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 16,564.12 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 61,169.85 |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 8 of 46

B6A (Official Form 6A) (12/07)

| _ | | |
|-------|--------------|---------|
| In re | Raful Garcia | Case No |
| | | |
| | | Debtor |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property Nature of Debtor's Interest in Property Nature of Debtor's Interest in Property Nature of Debtor's Wife, Joint, or Community Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption Amount of Secured Claim | 827 Porter Ave Joliet, IL 60432 | Joint tenant | J | 70,000.00 | 114,605.73 |
|--|--------------------------------------|--------------|--------------------|--|----------------------------|
| | Description and Location of Property | | Wife, Joint, or | Debtor's Interest in Property, without Deducting any Secured | Amount of Secured Claim |

Sub-Total > **70,000.00** (Total of this page)

Total > **70,000.00**

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 9 of 46

B6B (Official Form 6B) (12/07)

| In re | Raful Garcia | Case No |
|-------|--------------|---------|
| | | Debtor |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|--|
| 1. | Cash on hand | X | | | |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | ВМО Н | larris Checking | - | 1,000.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | Furnit | ure | - | 1,000.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 5. | Wearing apparel. | Clothi | ng | - | 500.00 |
| 7. | Furs and jewelry. | X | | | |
| 8. | Firearms and sports, photographic, and other hobby equipment. | x | | | |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | | |
| 10. | Annuities. Itemize and name each issuer. | X | | | |
| | | | | | |
| | | | (To | Sub-Tota of this page) | al > 2,500.00 |

2 continuation sheets attached to the Schedule of Personal Property

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 10 of 46

B6B (Official Form 6B) (12/07) - Cont.

| In re | Raful Garcia | Case No. |
|-------|--------------|--------------|
| _ | | , |

Debtor

SCHEDULE B - PERSONAL PROPERTY

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--|---|--|
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or | ı | IRA Retirement account with State Farm | - | 28,000.00 |
| | other pension or profit sharing plans. Give particulars. | | Retirement Account | - | 20,000.00 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | | Anticpated Tax Refund | - | 674.00 |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | | Death Benefit from spouse | - | 14,000.00 |
| 21. | Other contingent and unliquidated | , | Whole Life insurance policies. Cash Value \$2000 | - | 2,000.00 |
| | claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | , | Guarenteed Issue Insurance | - | 500.00 |
| | | | | Sub-Tot | al > 65,174.00 |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 11 of 46

B6B (Official Form 6B) (12/07) - Cont.

| In re | Raful Garcia | Case No. |
|-------|--------------|----------|
| _ | | , |

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | Х | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and | 199 | 98 Toyota Corolla | - | 1,579.00 |
| | other vehicles and accessories. | 200 | 94 Ford Taurus | - | 2,986.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | X | | | |
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| 35. | Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > (Total of this page)

4,565.00

Total >

72,239.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 12 of 46

B6C (Official Form 6C) (4/13)

| In re | Raful Garcia | Case No. |
|-------|--------------|----------|
| | | Debtor |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|--|----------------------------------|---|
| Real Property 827 Porter Ave Joliet, IL 60432 | 735 ILCS 5/12-901 | 0.00 | 70,000.00 |
| Checking, Savings, or Other Financial Accounts, C BMO Harris Checking | Certificates of Deposit 735 ILCS 5/12-1001(b) | 1,000.00 | 1,000.00 |
| Household Goods and Furnishings Furniture | 735 ILCS 5/12-1001(b) | 1,000.00 | 1,000.00 |
| Wearing Apparel Clothing | 735 ILCS 5/12-1001(a) | 500.00 | 500.00 |
| Interests in IRA, ERISA, Keogh, or Other Pension of IRA Retirement account with State Farm | or Profit Sharing Plans 735 ILCS 5/12-1006 | 28,000.00 | 28,000.00 |
| Retirement Account | 735 ILCS 5/12-1006 | 20,000.00 | 20,000.00 |
| Contingent and Non-contingent Interests in Estate Death Benefit from spouse | of a Decedent 735 ILCS 5/12-1001(h)(3) | 14,000.00 | 14,000.00 |
| Other Contingent and Unliquidated Claims of Ever Whole Life insurance policies. Cash Value \$2000 | <u>y Nature</u> 735 ILCS 5/12-1001(b) | 1,000.00 | 2,000.00 |
| Automobiles, Trucks, Trailers, and Other Vehicles 1998 Toyota Corolla | 735 ILCS 5/12-1001(b) | 1,000.00 | 1,579.00 |
| 2004 Ford Taurus | 735 ILCS 5/12-1001(c) | 2,400.00 | 2,986.00 |

| Total: | 68.900.00 | 141.065.00 |
|--------|-----------|------------|

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Page 13 of 46 Document

B6D (Official Form 6D) (12/07)

| In re | Raful Garcia | | Case No. |
|-------|--------------|--------|----------|
| _ | | Debtor | |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| Check this box if debtor has no creditors not | ung s | seci | ned claims to report on this Schedule D. | | | | | | | | | |
|--|--------------------------------------|---------------|--|---------------|-----------------------|----------|--|---------------------------------|--|--|--|--|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Hu H W J C | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTLXGENT | UNLLQULDA | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY | | | | |
| Account No. 0011864311 | | | Mortgage | Т | D A T E D | | | | | | | |
| Select Portfolio Servicing 3815 South West Temple Salt Lake City, UT 84115-4412 | | | 827 Porter Ave Joliet, IL 60432 | | D | | | | | | | |
| | Ш | | Value \$ 70,000.00 | | | | 114,605.73 | 44,605.73 | | | | |
| Account No. | - | | Value \$ Value \$ | - | | | | | | | | |
| Account No. | | | Value \$ | | | | | | | | | |
| continuation sheets attached | | | | Subt his p | | | 114,605.73 | 44,605.73 | | | | |
| | Total (Report on Summary of Schedule | | | | | | | | | | | |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 14 of 46

B6E (Official Form 6E) (4/13)

| In re | Raful Garcia | Case No |
|-------|--------------|----------|
| - | | Debtor , |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
|---|
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| ☐ Extensions of credit in an involuntary case |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| ☐ Wages, salaries, and commissions |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen |
| Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| ☐ Deposits by individuals |
| Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| ☐ Taxes and certain other debts owed to governmental units |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| ☐ Commitments to maintain the capital of an insured depository institution |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| ☐ Claims for death or personal injury while debtor was intoxicated |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 15 of 46

B6F (Official Form 6F) (12/07)

| In re | Raful Garcia | Case No. |
|-------|--------------|----------|
| | | Debtor |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| Check this box is debtor has no electrons nothing unsecure | . u . | | is to report on this benedule 1. | | | | | |
|---|----------|------------------------|---|------------|-------------|---------|------------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu H W J C | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | LIQU | F | S P U T | AMOUNT OF CLAIM |
| Account No. 37360 | | | Medical Bill | Ť | T E D | | | |
| Associated Radiologists of Joliet 6801 W 73rd St., #637 Bedford Park, IL 60499-5322 | | - | | | D | | | 109.81 |
| Account No. 5366704 | | | | | | T | 1 | |
| Creditors Collection Bureau, Inc. P.O. Box 63 Kankakee, IL 60901-0063 | | | Representing: Associated Radiologists of Joliet | | | | | Notice Only |
| Account No. 33265252 | | | Medical | | | Ī | | |
| Byram Healthcare 3010 Woodcreek Dr. Suite A Downers Grove, IL 60515 | | - | | | | | | |
| | | | | | | | | 99.00 |
| Account No. 67XXXX Cardinal Sleep Centers of America 3077 W. Jefferson St. Ste, 210 Joliet, IL 60435 | | - | Medical Bill | | | | | Unknown |
| | | | <u>. </u> | Subt | ota | ⊥ ìl | + | |
| continuation sheets attached | | | (Total of t | | | |) | 208.81 |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 16 of 46

B6F (Official Form 6F) (12/07) - Cont.

| In re | Raful Garcia | Case No | _ |
|-------|--------------|---------|---|
| _ | | Debtor | |

| | | | | _ | | _ | 1 |
|---|---------|----|---|--------------|------------------|-------------|-----------------|
| CREDITOR'S NAME, | CODEBTO | Hu | sband, Wife, Joint, or Community | - 6 | UNLI | D I | |
| MAILING ADDRESS | D | н | DATE CLAIM WAS INCURRED AND | N | Ļ | S P | |
| INCLUDING ZIP CODE, | В | W | CONSIDERATION FOR CLAIM. IF CLAIM | ТĹ | Q U | υ | |
| AND ACCOUNT NUMBER | 0 | C | IS SUBJECT TO SETOFF, SO STATE. | I N | ١'n | U T E | AMOUNT OF CLAIM |
| (See instructions above.) | Ř | ١ | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | CONTINGEN | ח | D | |
| Account No. 5653-0989181 | | | Medical Bill | Ť | A T E D | | |
| CaraCantriu | | | | - | 10 | | |
| CareCentrix | | | | | | | |
| PO Box 277947 | | - | | | | | |
| Atlanta, GA 30384-7947 | | | | | | | |
| | | | | | | | |
| | | | | | | | 551.35 |
| Account No. 58563706 | | | Credit Card | Т | | | |
| | | | | | | | |
| Comenity-Room Place | | | | | | | |
| PO Box 1827789 | | - | | | | | |
| Columbus, OH 43218 | | | | | | | |
| | | | | | | | |
| | | | | | | | Unknown |
| Account No. 388961M0 | t | | Collection | + | | | |
| | 1 | | | | | | |
| Creditors Discount & Audit | | | | | | | |
| 415 E. Main St. | | - | | | | | |
| P.O. Box 213 | | | | | | | |
| Streator, IL 61364-0213 | | | | | | | |
| 0.100.101, 12 01004 0210 | l | | | | | | Unknown |
| | ╀ | | B (B) | + | | | Olikilowii |
| Account No. 33074XXXX | ł | | Parent Plus Loan | | | | |
| Department of Education Student Loa | | | | | | | |
| PO Box 7063 | | L | | | | | |
| | | | | | | | |
| Utica, NY 13504 | | | | | | | |
| | | | | | | | |
| | | | | | | | Unknown |
| Account No. 522-52-5299-7 | | | Medical Supplies | | | _ | |
| | 1 | | | | | | |
| Edgepark Medical Supplies | 1 | | | | l | | |
| 1810 Summit Commerce Park | | - | | | | | |
| Twinsburg, OH 44087 | 1 | | | | | | |
| | | | | | | | |
| | 1 | | | | | | 507.02 |
| | | | | 丄 | | L | 007.02 |
| Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of | | | | Sub | | | 1,058.37 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | this | pag | e) | |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 17 of 46

B6F (Official Form 6F) (12/07) - Cont.

| In re | Raful Garcia | Case No | _ |
|-------|--------------|---------|---|
| _ | | Debtor | |

| | | | | | _ | | - |
|--|----------|-------------|---|------------|-------------|--------|-----------------|
| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | Ç | U | D | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | DZL_QD_DAHE | T F | AMOUNT OF CLAIM |
| Account No. 003192497 | | | Medical Bill | Т | T E | | |
| EM Strategies LTD PO Box 1208 Bedford Park, IL 60499-1208 | | _ | | | D | | 328.48 |
| Account No. 0592619332 | | | Credit Card | | | | |
| Kohl's Collection Department P.O. Box 3084 Milwaukee, WI 53201 | | - | | | | | |
| | | | | | | | 333.55 |
| Account No. 112049 | | | Medical Bill | | | | |
| MBB 1460 Renaissance Drive Park Ridge, IL 60068 | | - | | | | | Unknown |
| Account No. 5XXXX | ┢ | | Credit Card | | Н | | |
| New York & Company P.O. Box 659728 San Antonio, TX 78265 | | - | | | | | Unknown |
| Account No. 113655S | ┢ | | Medical Bill | \vdash | H | - | |
| Optima Medical Associates 1050 Essington Rd. Joliet, IL 60435 | | - | | | | | 227.03 |
| Sheet no. 2 of 5 sheets attached to Schedule of | _ | _ | | Subt | ota | l 1 | 222.55 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | e) | 889.06 |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 18 of 46

B6F (Official Form 6F) (12/07) - Cont.

| In re | Raful Garcia | Case No. | |
|-------|--------------|----------|--|
| _ | | Debtor | |

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | CO | U | D | |
|--|----------|-------------|---|------------|-------------|-------------|---|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTLNGENT | UNLIQUIDAT | U T F | AMOUNT OF CLAIM |
| Account No. 603220338435 | | | Collection | Т | T E D | | |
| Portfolio Recovery PO Box 12914 Norfolk, VA 23541 | | - | | | D | | Unknown |
| Account No. 512107196012 | | | Credit Card | | | | |
| Sears Citibank PO Box 183081 Columbus, OH 43218-3081 | | - | | | | | Unknown |
| Account No. F040395371 | L | | Medical Bills | | | | O I I I I I I I I I I I I I I I I I I I |
| Silver Cross Hospital 1900 Silver Cross Blvd. New Lenox, IL 60451-9508 | | - | inculou Bills | | | | 9,374.69 |
| Account No. 973XXXX | | | | | | | |
| MRSI 2250 E. Devon Ave. Ste 352 Des Plaines, IL 60018 | | | Representing: Silver Cross Hospital | | | | Notice Only |
| Account No. F040304187 | T | | Medical Bill | | | | |
| Silver Cross Hospital Payment Processing Center PO Box 739 Moline, IL 61266 | | _ | | | | | 111.29 |
| Sheet no. 3 of 5 sheets attached to Schedule of | - | | | Subt | ota | l | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | | | | 9,485.98 |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 19 of 46

B6F (Official Form 6F) (12/07) - Cont.

| In re | Raful Garcia | Case No. | |
|-------|--------------|----------|--|
| _ | | Debtor | |

| CREDITOR'S NAME, MAILING ADDRESS | C O D | Hu H | sband, Wife, Joint, or Community | CONTI | U N L | DISPUT | , | |
|--|-------------|---------|---|----------------|-------------|-----------|-----|-----------------|
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C N | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | TINGENT | I QU I DAT | | : | AMOUNT OF CLAIM |
| Account No. 390100072 | | | |] ` | T E D | | Ī | |
| Sodexo PO Box 1243 Carol Stream, IL 60132 | | - | | | | | | 2,873.22 |
| Account No. 15861 | t | | Credit card | + | \vdash | \dagger | † | |
| Synchrony Bank/ JCP PO Box 960090 Orlando, FL 32896 | | - | | | | | | 59,08 |
| Account No. 9568 | ╁ | | Credit Card | + | ╁ | ╁ | + | |
| Target Card Services PO Box 660170 Dallas, TX 75266-0170 | | - | | | | | | 044.70 |
| Account No. MXF607 | - | - | | oppi | ┝ | ╄ | 4 | 841.76 |
| Financial Recovery Services Inc. P.O. Box 385908 Minneapolis, MN 55438 | | | Representing: Target Card Services | | | | | Notice Only |
| Account No. 03348049 | T | T | Medical Bill | T | T | T | † | |
| University of Chicago Medicine 15965 Collections Center Drive Chicago, IL 60693-0159 | | - | | | | | | 753.04 |
| Sheet no4 _ of _5 _ sheets attached to Schedule of | _ | | <u>,</u> | Subt | tota | ıl | † | 4,527.10 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pas | ze) | , [| 4,327.10 |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 20 of 46

B6F (Official Form 6F) (12/07) - Cont.

| In re | Raful Garcia | Case No |
|-------|--------------|---------|
| | | Debtor |

| Account No. | | | | | | | _ | | |
|--|--|--------|--------|---|----------|-----|-----|---|---------------|
| Account No. 3-1415166 | CREDITOR'S NAME, | CO | Hu | sband, Wife, Joint, or Community | CO | U | D | | |
| Medical Bill University of Chicago Physicians Gr 75 Remittance Dr Ste 1385 Chicago, IL 60675 Medical Bill Vision Financial Service 555 Michigan Avenu Suite 204 La Porte, IN 46350-3372 Account No. Account No. Account No. Sheet no. 5_ of 5_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Total Wedical Bill Age of 1 | MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER | DEBTOR | W J | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | NT LNGEN | | | | OUNT OF CLAIM |
| University of Chicago Physicians Gr 75 Remittance Dr Stel 1385 Chicago, IL 60675 Account No. 728543 Medical Bill Medical Bill | Account No. 3-1415166 | | | Medical Bills | Т | E | | | |
| Vision Financial Service 555 Michigan Avenu Suite 204 La Porte, IN 46350-3372 Account No. Account No. Account No. Sheet no. 5_ of 5_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Total Total | 75 Remittance Dr Ste 1385 | | - | | | D | | - | 330.80 |
| Shet no. 5 of 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Creditors Holding Unsecured Nonpriority Claims Capable | Account No. 728543 | Ī | T | Medical Bill | \top | | | | |
| Account No. Account No. Account No. Sheet no. 5 of 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Sheet no. 5 to 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Total | 555 Michigan Avenu Suite 204 | | - | | | | | | |
| Account No. Account No. Account No. Sheet no. 5 of 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Total | | | | | | | | | 64.00 |
| Sheet no. 5 of 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Total Total | | | | | | | | | |
| Sheet no. 5 of 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Total Total | A count No | | | | | | | | |
| Creditors Holding Unsecured Nonpriority Claims (Total of this page) Total | Account No. | | | | | | | | |
| Creditors Holding Unsecured Nonpriority Claims (Total of this page) Total | | | | | | | | | 304 80 |
| 40 504 40 | Creditors Holding Unsecured Nonpriority Claims | | | (Total of | this | pag | ge) | | |
| (Report on Summary of Schedules) I 10,004.12 | | | | (Report on Summary of S | | | | | 16,564.12 |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 21 of 46

B6G (Official Form 6G) (12/07)

| In re | Raful Garcia | Case No. |
|-------|--------------|----------|
| _ | | Debtor |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 22 of 46

B6H (Official Form 6H) (12/07)

| In ro | Raful Garcia | Casa Na |
|-------|--------------|-------------|
| In re | Raful Garcia | Case No |
| _ | | |
| | | Debtor |

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 23 of 46

| Fill | in this information to identify your | case: | | | | | 1 | | | | |
|--------------------|--|---|-------------------------------|--------------------------------------|---------------------|--------------|-------------------|-------------------------------|--|---------------------------------|-------------------|
| Del | otor 1 Raful Gard | ia | | | | | | | | | |
| | otor 2 ouse, if filing) | | | | | | | | | | |
| Uni | ted States Bankruptcy Court for the | ne: NORTHERN DISTRIC | CT OF | FILLINOIS | | _ | | | | | |
| (If kr | fficial Form B 6l | come | - | | | | | | ed filing ent showir as of the f | ng post-petition ollowing date: | |
| sup spo atta | as complete and accurate as poplying correct information. If you are separated and you have a separated sheet to this form the complex to the | u are married and not fili our spouse is not filing w . On the top of any addit | ng jo ith yo | ointly, and your ou, do not inclu | spouse ude infor | is li mat | /ing wi on abo | th you, inc out your sp | lude infor ouse. If m | mation abou nore space is | t your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 | Debtor 2 or non-filing spouse | | | |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status Occupation | □■ | Employed Not employed | d | | | | oloyed employed | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | | | |
| | Occupation may include studen or homemaker, if it applies. | t Employer's address | | | | | | | | | |
| | | How long employed t | here' | ? | | | | | | | |
| Esti | mate monthly income as of the use unless you are separated. | | you h | nave nothing to | report for | any | line, w | rite \$0 in the | e space. Ir | nclude your no | on-filing |
| | u or your non-filing spouse have respace, attach a separate sheet | | ombir | ne the information | on for all | emp | oyers f | or that pers | on on the | lines below. If | you need |
| | | | | | | | For D | ebtor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, sa deductions). If not paid monthly | | | | 2. | \$ | | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly over | rtime pay. | | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add | line 2 + line 3. | | | 4. | \$ | | 0.00 | \$ | N/A | |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 24 of 46

| Debto | or 1 | Raful Garcia | - | Case n | umber (if known) | | | |
|-------|-------------------|--|-------------------|----------|----------------------|----------|-------------------------------|---------|
| | | | | For | Debtor 1 | | Debtor 2 or -filing spouse | |
| | Сор | y line 4 here | 4. | \$ | 0.00 | \$ | N/A | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$_ | 0.00 | \$_ | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: | _ 5h.+ | - \$ | 0.00 | + \$ | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0.00 | \$ | N/A | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | |
| | 8c. 8d. 8e. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security | 8c. 8d. 8e. | \$ \$ | 0.00 0.00 0.00 | \$ \$ | N/A N/A N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | \$ | 0.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: | _ 8h.+ | \$ | 0.00 | + \$ | N/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. \$ | | 0.00 + \$ | | N/A = \$ | 0.00 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | | | |
| | othe Do r | te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | deper | | | | Schedule J. 11. +\$ | 0.00 |
| | | the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailes | | | | | 12. \$ | 0.00 |
| | | | | | | | Combine | |
| 13. | Do y | you expect an increase or decrease within the year after you file this form | ? | | | | monthly | HICOHIE |
| | | No. | | | | | | |
| | | Yes. Explain: | | | | | | |

Official Form B 6I Schedule I: Your Income page 2

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 25 of 46

| Fill | in this informat | ion to identify yo | our case | : | | | | | |
|-----------|---|---|---------------------|---|-------------------------|--|--------------------------|--|---|
| Deb | otor 1 | Raful Garcia | 1 | | | | Che | eck if this is: | |
| | otor 2 ouse, if filing) | | | | | | | | wing post-petition chapter the following date: |
| Unit | ed States Bankru | ptcy Court for the: | : NOR | THERN DISTRICT | OF ILLIN | OIS | | MM / DD / YYYY | |
| Cas | e numbe r | | | | | | П | A separate filing for | or Debtor 2 because Debtor |
| (If kı | nown) | | | | | | _ | 2 maintains a sepa | arate household |
| | fficial Fo | | _ | | | | | | |
| | | J: Your | | | | | | | 12/13 |
| info | ormation. If mo | | eded, at | tach another she | | | | | for supplying correct your name and case |
| Par 1. | t 1: Descri | be Your House | hold | | | | | | |
| | ■ No. Go t | o line 2. | e in a se | parate household | 12 | | | | |
| | N | О | • | | | | | | |
| | □ Y | es. Debtor 2 mi | ust file a | separate Schedul | e J. | | | | |
| 2. | Do you have | dependents? | ■ No | 0 | | | | | |
| | Do not list De and Debtor 2. | | □ Yes. | Fill out this inform each dependent | | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Do not state t | | | | | | | | □ No |
| | dependents' r | iames. | | | | | | | ☐ Yes ☐ No |
| | | | | | | | | | ☐ Yes |
| | | | | | | | | | □ No |
| | | | | | | | | | ☐ Yes ☐ No |
| _ | _ | | | | | | | | Yes |
| 3. | expenses of | enses include people other t your depende | han nts? | ■ No □ Yes | | | | | |
| Par | | te Your Ongoi | | | | | | | |
| exp | imate your expoenses as of a blicable date. | penses as of ye date after the l | our bank bankrup | cruptcy filing date tcy is filed. If this | e unless y is a supp | ou are using this followed the second | orm as a s e J, check | supplement in a Ch the box at the top | apter 13 case to report of the form and fill in the |
| the | | assistance an | | h government as ncluded it on <i>Scl</i> | | | | Your exp | enses |
| | • | | hin ava | nace for very re- | oldonoo l | | _ | · | |
| 4. | | d any rent for th | | | sidence. | nclude first mortgag | e 4. | \$ | 1,200.00 |
| | If not include | ed in line 4: | | | | | | | |
| | | state taxes | | | | | 4a. | · | 0.00 |
| | • | ty, homeowner's | | | • | | 4b. 4c. | | 0.00 |
| | | | | d upkeep expense: ondominium dues | 5 | | 4c. 4d. | | 0.00 |
| 5. | | | | your residence, s | uch as ho | me equity loans | 5. | · | 0.00 |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 26 of 46

| Deb | otor 1 | Raful Ga | rcia | Case num | ber (if known) | |
|-----|--------------|--------------------------------|---|----------|----------------|-------------------------------|
| 6. | Utilit | ies: | | | | |
| 0. | 6a. | | heat, natural gas | 6a. | \$ | 180.00 |
| | 6b. | • | ver, garbage collection | 6b. | · · | 60.00 |
| | 6c. | • | , cell phone, Internet, satellite, and cable services | 6c. | | 0.00 |
| | 6d. | Other. Spe | | 6d. | · — | 0.00 |
| 7. | | | ekeeping supplies | 7. | \$ | 300.00 |
| 8. | | | hildren's education costs | 8. | \$ | 0.00 |
| 9. | | | ry, and dry cleaning | 9. | \$ | 10.00 |
| - | | - | roducts and services | 10. | | 40.00 |
| | | • | ntal expenses | 11. | · — | 25.00 |
| | | | Include gas, maintenance, bus or train fare. | | Ψ | 23.00 |
| 12. | | | ar payments. | 12. | \$ | 120.00 |
| 13. | | | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| 14. | | | ributions and religious donations | 14. | \$ | 0.00 |
| 15. | Insur | | | | · | |
| - | | | surance deducted from your pay or included in lines 4 or 2 | 20. | | |
| | 15a. | Life insura | nce | 15a. | \$_ | 0.00 |
| | 15b. | Health ins | urance | 15b. | \$ | 0.00 |
| | 15c. | Vehicle ins | surance | 15c. | \$ | 100.00 |
| | 15d. | Other insu | rance. Specify: | 15d. | \$ | 0.00 |
| 16. | Taxe | s. Do not in | clude taxes deducted from your pay or included in lines 4 | or 20. | | |
| | Spec | ify: | | 16. | \$ | 0.00 |
| 17. | | | ease payments: | | | |
| | | | ents for Vehicle 1 | 17a. | \$ | 0.00 |
| | 17b. | Car payme | ents for Vehicle 2 | 17b. | \$ | 0.00 |
| | 17c. | Other. Spe | ecify: | 17c. | \$ | 0.00 |
| | 17d. | Other. Spe | ecify: | 17d. | \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that you did not | | • | 0.00 |
| | | | your pay on line 5, Schedule I, Your Income (Official Fo | | | 0.00 |
| 19. | | | you make to support others who do not live with you | | \$ | 0.00 |
| | Spec | , | | 19. | | |
| 20. | | | erty expenses not included in lines 4 or 5 of this form | | | |
| | | | on other property | 20a. | | 0.00 |
| | | Real estat | | 20b. | · | 0.00 |
| | | | nomeowner's, or renter's insurance | 20c. | · | 0.00 |
| | | | ce, repair, and upkeep expenses | 20d. | · - | 0.00 |
| | | | er's association or condominium dues | 20e. | | 0.00 |
| 21. | Othe | r: Specify: | | 21. | +\$ | 0.00 |
| 22 | Your | monthly e | xpenses. Add lines 4 through 21. | 22. | \$ | 2.035.00 |
| | | • | r monthly expenses. | | * | 2,000.00 |
| 23. | | • | nonthly net income. | | | |
| _0. | | • | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 0.00 |
| | | | monthly expenses from line 22 above. | 23b. | · · | 2,035.00 |
| | | | | | | 2,000.00 |
| | 23c. | Subtract v | our monthly expenses from your monthly income. | | l. | |
| | | | is your monthly net income. | 23c. | \$ | -2,035.00 |
| 24. | For exmodifi | kample, do yo ication to the t | an increase or decrease in your expenses within the yeu expect to finish paying for your car loan within the year or do you earms of your mortgage? | | | ease or decrease because of a |
| | | res. | | | | |
| | Expla | ain: | | | | |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 27 of 46

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

| In re | Raful Garcia | | | Case No. | | | | | | | | |
|-------|--|-----------|------------------|----------|---|--|--|--|--|--|--|--|
| | | | Debtor(s) | Chapter | 7 | | | | | | | |
| | DECLARATION CONCERNING DEBTOR'S SCHEDULES DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR | | | | | | | | | | | |
| | DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR | | | | | | | | | | | |
| | I declare under penalty of perjury of 21 sheets, and that they are true and | | | | | | | | | | | |
| Date | November 2, 2015 | Signature | /s/ Raful Garcia | | | | | | | | | |
| | | | Raful Garcia | | | | | | | | | |
| | | | Debtor | | | | | | | | | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 28 of 46

B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

| In re | Raful Garcia | | Case No. | |
|-------|--------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint

AMOUNT SOURCE

\$2,905.00 2014: Husband Employment Income \$33,658.00 2013: Husband Employment Income

petition is filed, unless the spouses are separated and a joint petition is not filed.)

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$12,908.00 2014: Debtor IRA Distributions \$15,594.00 2013: Debtor IRA Distributions Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 29 of 46

B7 (Official Form 7) (04/13)

2

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS

VALUE OF AMOUNT STILL TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT

PAID OR

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

PROCEEDING
Capital One Bank (NA) v. Delia Garcia 14SC8373

NATURE OF
PROCEEDING
AND LOCATION
Will County, IL

STATUS OR
AND LOCATION
JUSPOSITION
Judgment

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 30 of 46

B7 (Official Form 7) (04/13)

3

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Law Office of Patrick A. Meszaros 1100 W. Jefferson Street Joliet, IL 60435 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 3/13/2015 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$800.00 Attorney fee + \$335.00
filing fee = 1,135

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 31 of 46

B7 (Official Form 7) (04/13)

1

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 32 of 46

B7 (Official Form 7) (04/13)

5

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Delia Garcia deceased as of March 2015

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 33 of 46

B7 (Official Form 7) (04/13)

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS

ENDING DATES

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | November 2, 2015 | Signature | /s/ Raful Garcia | |
|------|------------------|-----------|------------------|--|
| | | | Raful Garcia | |
| | | | Debtor | |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 34 of 46

B8 (Form 8) (12/08)

United States Bankruptcy CourtNorthern District of Illinois

| | 1 tol therm D | | • | |
|--|---|------------------|--|----------------------------------|
| In re Raful Garcia | | | Case No. | |
| | | Debtor(s) | Chapter | 7 |
| CHADTE | R 7 INDIVIDUAL DEBT | ODIC CTATEM | ENT OF INTEN | TION |
| CHAPTE | K / INDIVIDUAL DEDIV | OK S STATEM | ENI OF INTEN | HION |
| PART A - Debts secured by pro property of the estate. A | perty of the estate. (Part A attach additional pages if ne | | npleted for EAC l | H debt which is secured by |
| Property No. 1 | | | | |
| Creditor's Name: Select Portfolio Servicing | | | erty Securing Debt Joliet, IL 60432 | : |
| Property will be (check one): | | | | |
| ☐ Surrendered | ■ Retained | | | |
| If retaining the property, I intend to ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain Continue U.S.C. § 522(f)). Property is (check one): ☐ Claimed as Exempt PART B - Personal property subject Attach additional pages if necessary | e to pay on Mortgage no rea | □ Not claimed | as exempt | |
| | | | | |
| Property No. 1 | | | T | |
| Lessor's Name: -NONE- | Describe Leased Pr | operty: | Lease will be U.S.C. § 365 | e Assumed pursuant to 11 (p)(2): |
| I declare under penalty of perjury personal property subject to an under Date November 2, 2015 | | /s/ Raful Garcia | ny property of my | |
| | | Debtor | | |
| | | DUUUI | | |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 35 of 46

United States Bankruptcy Court Northern District of Illinois

| In re | Raful Garcia | | | Case No. | | |
|---------|---|--|--|--|--|-------------|
| | | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE (| OF COMPENS | ATION OF ATTOR | NEY FOR DI | EBTOR(S) | |
| (| Pursuant to 11 U.S.C. § 329(a) and Bar compensation paid to me within one ye be rendered on behalf of the debtor(s) i | ar before the filing of | f the petition in bankruptcy, o | or agreed to be paid | to me, for services re | |
| | For legal services, I have agreed to | o accept | | \$ | 800.00 | |
| | Prior to the filing of this statement | | | | 800.00 | |
| | Balance Due | | | \$ | 0.00 | |
| 2. | The source of the compensation paid to | me was: | | | | |
| | Debtor | | Other (specify): | | | |
| 3. ′ | The source of compensation to be paid | to me is: | | | | |
| | Debtor | | Other (specify): | | | |
| 5. 1 | ■ I have not agreed to share the afirm. □ I have agreed to share the above-dicopy of the agreement, together with the following of the above-disclosed fee, I a. Analysis of the debtor's financial sith. Preparation and filing of any petition. Representation of the debtor at the fid. [Other provisions as needed] | sclosed compensation th a list of the names have agreed to rende | n with a person or persons whof the people sharing in the car legal service for all aspects advice to the debtor in deterent of affairs and plan which r | no are not members compensation is atta of the bankruptcy comining whether to may be required; | or associates of my lached. case, including: file a petition in bank | aw firm. A |
| | By agreement with the debtor(s), the ab | | | service: | | |
| | | | CERTIFICATION | | | |
| | I certify that the foregoing is a complet bankruptcy proceeding. | e statement of any ag | reement or arrangement for p | ayment to me for re | epresentation of the d | ebtor(s) in |
| Dated | d: November 2, 2015 | | /s/ Patrick A. Mesz | | | |
| | | | Patrick A. Meszard Law Office of Patri 1100 W. Jefferson Joliet, IL 60435 815-722-4001 Fax PatrickMeszaros@ | ck A. Meszaros Street : 815-722-4007 | | _ |

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 36 of 46

CHAPTER 7 BANKRUPTCY CONTRACT FOR SERVICES

This agreement is executed this 20 day of March, 2014 by and between Patrick A. Meszaros P.C. (hereinafter the "Attorney") and Raful Care (hereinafter "Debtor", whether one or more). The parties agree as follows:

TYPE OF BANKRUPTCY

Client retains attorney to file a Chapter 7 bankruptcy. If the Debtor determines at a later date that the Debtor desires to file a Chapter 13 bankruptcy, the parties shall execute a new fee contract setting forth the terms of such representation.

SERVICES PROVIDED BY ATTORNEY

Contingent upon being paid for the services as specified below, the Attorney shall provide the following legal services for the Debtor: Preparation of Bankruptcy Petition, ordering of Credit Report (if requested), ordering Tax Transcripts, Filing of Petition, and representation at one Section 341 Meeting of Creditors.

FEES.

The base fee for the filing of the bankruptcy is \$ 300 00 plus costs of \$335.00 for the filing fee and \$ credit report (if requested by Client) for a total of \$ 1,135 The fee is based on the following assumptions:

- a) Debtor has provided Attorney with complete and accurate information.
- b) Client will pay the fee in a reasonable amount of time, but no later than 180 days from this date.

If either of the assumptions set out above are inaccurate, and as result, the amount of legal service to be provided by the Attorney and/or his staff is increased, the fee shall be increased accordingly to compensate the Attorney for the additional time and expense in providing the legal services.

TERMS OF PAYMENT

a) All Fees and Costs shall be paid prior to the filing of the case.

SERVICES NOT PROVIDED UNDER THE BASE FEE

The services set out below are not provided under the base fee. Compensation for these services shall be as provided below:

- For changes to petition after case has been filed.
- Representation in an Adversary Action if one is filed against Debtor(s).

COMPENSATION FOR SERVICES NOT COVERED UNDER BASE FEE

The Debtor shall compensate the Attorney for the above services prior to completion of services. The Debtor understands that if the Debtor does not pay the fees as set out above, the Attorney has no obligation to provide the services, and has the right to file a motion to withdraw as the attorney for the Debtor in this case or in an adversary proceeding.

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 37 of 46

DEBTOR (S) OBLIGATIONS

The Debtor's Obligations are as follows:

- a) To pay the fees as set out above. Pail on 3/13/15
- b) To provide accurately and honestly all the information necessary to prepare and file the Chapter 7 bankruptcy.
- c) To completely and honestly fill out the forms provided to you.
- d) To keep the Attorney advised at all times of the Debtor's address and telephone numbers.
- e) To promptly respond to any inquires made by the attorney or the attorney's staff.
- f) To attend the 341 Creditors Meeting and any other hearings set in the case.
- g) To provide any information requested of the Debtor by the chapter 7 trustee, the U.S. Trustee, or any other party in the case, unless the Court rules that the Debtor is not required to provide the information.

| is not required to provide the info | ormation. |
|-------------------------------------|---|
| Date: 3/20 (15 | By: Law Offices of Patrick A. Meszaros P.C. |
| Date: 3/20/15 | By: Debtor |
| Date: | By: |

ADDITIONAL NOTICES TO CLIENT

- 1. TIME OF FILING. Client agrees/understands that the Bankruptcy Petition will not be filed until client has paid any balance still owed on file. Client further agrees that certain services will be performed on behalf of client such as preparing the bankruptcy petition, reviewing creditor claims, identifying available exemptions, etc. prior to the actual filing of the bankruptcy petition. Due to these services being performed the client should expect that these services will be billed against the initial retainer paid in the event the client decides not file bankruptcy. Services will be billed at \$275.00 per hour.
- 2. CREDIT REPORT. Client agrees and understands that the Law Office of Patrick A. Meszaros has nothing to do with items reflected on the client's credit report. Credit reporting bureaus will report what is communicated to them by the client's creditors. The client agrees that it will be his or her responsibility to follow up on items reflected on his or her credit report which he/she feels are not accurate. The Law Office of Patrick A. Meszaros will not perform any credit report "cleaning" as part of this case.
- 3. ASSETS AND BILLS. All of your assets and bills must be disclosed on the bankruptcy petition. This is true even if you plan on reaffirming a particular debt. It is Perjury to knowingly fail to disclose a debt or asset.
- 4. CREDIT CARDS. Any charges or cash advances incurred on a credit card within 90 days of the date you file bankruptcy ARE NOT DISCHARGEABLE. If this pertains to your case you will need to discuss this with the attorney before you file bankruptcy. Once your case has been filed all of your credit cards will be terminated and no longer available for use. Lastly, not all credit card companies will agree to reaffirm their debt with you. For example, Discover Card will not agree to enter into any reaffirmation agreements. This means that you will not be able to keep certain credit cards even if you want to.
- 5. CREDIT UNIONS. If you owe any money to a credit union and you have deposits with that credit union discuss this with the attorney. Usually all accounts with a credit union are cross-collateralized by your other accounts. This means that any funds you have on deposit with the credit union will be used to offset a debt owed to them at the time of filing. This also pertains to car loans with the credit union. Discuss this with the attorney if this pertains to you.
- 6. REAFFIRMATION AGREEMENTS. If you reaffirm a debt, you are agreeing to repay that debt when you otherwise would not have to. This occurs most often with secured debt, which is a debt you incurred to purchase a particular item such as a car or home. This includes car loans, first mortgages, second mortgages or equity lines on your home.
 - 7. CREDITOR'S MEETING. On the date of the creditor's meeting you must be present. You must bring with you a picture ID and something that displays your social security number. The following usually will accomplish this: your driver's license, social security card, payroll stub, gun owner's permit, or a health insurance card. Failure to attend your creditors meeting can lead to the dismissal of your case and an additional \$75.00 attorney's fee for the continued meeting.
 - 8. UTILITY BILLS. Utility balances owed as of the day my case is filed can be discharged. However all utility companies will ask that you deposit a security deposit with them to

maintain your service if you discharge a utility balance. The deposit remains your money and you are usually paid interest on these funds. The deposit will also be refunded to you usually after a year if your payments have been made on time. The deposit amount ranges from \$100 to \$200 depending on the particular utility company. Therefore, if you have a small utility balance, you may wish to pay it rather than discharging the balance. Contact the utility company for their specific policy.

- 9. MORTGAGE PAYMENTS. If you own any real estate, which you wish to retain, you must remain current on your mortgage payments.
- 10. COPY OF PETITION AND DISCHARGE NOTICE. The client will be furnished, free of charge, with one copy of his bankruptcy petition at time of filing and discharge notice upon issuance by the Court.
- 11. BILLS RECEIVED AFTER YOU FILE. It is very common to receive bills from a creditor after you file for bankruptcy. This occurs mainly because the creditor or collection agency has not updated their records to reflect that your debt has been or will be discharged in the bankruptcy case. If this happens to you, contact the creditor or collection agency and inform them that you filed bankruptcy and that you should be taken off their mailing list. This will take care of the majority of the notices, if not all.

Please Initial at Bottom of this Page

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 41 of 46

Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Case 15-37367 Doc 1 Filed 11/02/15 Entered 11/02/15 11:04:33 Desc Main Document Page 42 of 46

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois

| | | Northern District of Illinois | | |
|---------|--|--|----------------------|-------------------------------|
| In re | Raful Garcia | | Case No. | |
| | | Debtor(s) | Chapter | 7 |
| | | OF NOTICE TO CONSUM 42(b) OF THE BANKRUPT | | R(S) |
| Code. | I (We), the debtor(s), affirm that I (we) ha | Certification of Debtor ve received and read the attached no | otice, as required l | by § 342(b) of the Bankruptcy |
| Raful | Garcia | χ /s/ Raful Garci | ia | November 2, 2015 |
| Printed | d Name(s) of Debtor(s) | Signature of De | ebtor | Date |
| Case N | No. (if known) | X | | |
| | | Signature of Jo | oint Debtor (if any |) Date |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Northern District of Illinois

| | | - (| | |
|-------|---|--|-----------------------------|----------------|
| In re | Raful Garcia | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | ${f V}$ | ERIFICATION OF CREDITOR M | MATRIX | |
| | | Number of | f Creditors: | 27 |
| | The above-named Debtor(s (our) knowledge. |) hereby verifies that the list of credi | tors is true and correct to | the best of my |
| | | /s/ Raful Garcia | | |

Associated Radiologists of Joliet 6801 W 73rd St., #637 Bedford Park, IL 60499-5322

Byram Healthcare 3010 Woodcreek Dr. Suite A Downers Grove, IL 60515

Cardinal Sleep Centers of America 3077 W. Jefferson St. Ste, 210 Joliet, IL 60435

CareCentrix PO Box 277947 Atlanta, GA 30384-7947

Comenity-Room Place PO Box 1827789 Columbus, OH 43218

Creditors Discount & Audit 415 E. Main St. P.O. Box 213 Streator, IL 61364-0213

Creditors Collection Bureau, Inc. P.O. Box 63
Kankakee, IL 60901-0063

Department of Education Student Loa PO Box 7063 Utica, NY 13504

Edgepark Medical Supplies 1810 Summit Commerce Park Twinsburg, OH 44087

EM Strategies LTD PO Box 1208 Bedford Park, IL 60499-1208

Financial Recovery Services Inc. P.O. Box 385908 Minneapolis, MN 55438

Kohl's Collection Department P.O. Box 3084 Milwaukee, WI 53201

MBB 1460 Renaissance Drive Park Ridge, IL 60068

MRSI 2250 E. Devon Ave. Ste 352 Des Plaines, IL 60018

New York & Company P.O. Box 659728 San Antonio, TX 78265

Optima Medical Associates 1050 Essington Rd. Joliet, IL 60435

Portfolio Recovery PO Box 12914 Norfolk, VA 23541

Sears Citibank PO Box 183081 Columbus, OH 43218-3081

Select Portfolio Servicing 3815 South West Temple Salt Lake City, UT 84115-4412

Silver Cross Hospital 1900 Silver Cross Blvd. New Lenox, IL 60451-9508

Silver Cross Hospital Payment Processing Center PO Box 739 Moline, IL 61266

Sodexo PO Box 1243 Carol Stream, IL 60132 Synchrony Bank/ JCP PO Box 960090 Orlando, FL 32896

Target Card Services PO Box 660170 Dallas, TX 75266-0170

University of Chicago Medicine 15965 Collections Center Drive Chicago, IL 60693-0159

University of Chicago Physicians Gr 75 Remittance Dr Ste 1385 Chicago, IL 60675

Vision Financial Service 555 Michigan Avenu Suite 204 La Porte, IN 46350-3372